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STATE AND CONSUMER SERVICES AGENCY
DEPARTMENT OF CONSUMER AFFAIRS
GOVERNOR EDMUND G. BROWN JR.

Communication and Public Education Committee Report

Ryan Brooks, Chair, Public Member
Shirley Wheat, Board Member
Ramon Castellblanch, PhD, Board Member
Debbie Veale, RPh, Board Member
Rosalyn Hackworth, Board Member

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a. Report of the Meeting Held January 10, 2011

1. FOR INFORMATION: Update of the State's Emergency Contraception Protocol Regulation (16 California Code of Regulations Section 1746) and Consumer Fact Sheet

Attachment 1

The Board of Pharmacy needs to update the emergency contraception protocol authorized by California Business and Professions Code section 4052.3 and 16 California Code of Regulations section 1746 (**Attachment 1**). These sections authorize a pharmacist to initiate emergency contraception pursuant to a state protocol developed by the Medical Board of California and the Board of Pharmacy, and with the assistance of the American College of Obstetricians and Gynecologists, the California Pharmacist Association and other entities.

The current state protocol was developed in 2004 and adopted by this board as a regulation. Since the time of adoption, there have been changes in the availability of emergency contraception medicine, the manufacturers who produce the medication, and there is a typo that needs correction (mcg instead of mg).

Since the last board meeting, the executive officer has met with the Medical Board's executive officer, and spoken with CPhA's representative (a women's health specialist pharmacist), and a representative of the American College of Obstetricians and Gynecologists. An updated manuscript is being prepared, and will be shared with all entities and brought to the board at the May meeting.

Thereafter, once both boards have an opportunity to review and approve the protocol, the Board of Pharmacy will need to adopt the protocol as a revision to regulation section 1746.

As part of the rulemaking, this board will need to develop a patient information fact sheet, which is required to be provided to patients by the pharmacists using the protocol to dispense emergency contraception. A copy of the current fact sheet is also provided at the back of **Attachment 1**.

2. FOR INFORMATION: Discussion of the 39th Annual Report of the Research Advisory Panel of California

At the last meeting of this Communication and Public Education Committee, the committee asked that a representative of the Research Advisory Panel of California come to a future meeting to explain the role and activities of this group. While the executive officer of the advisory panel had been invited to attend the committee's January meeting, she was unable to attend. She will be invited to a future meeting of this committee, and a full report shared with the board at a future meeting.

3. FOR DISCUSSION: Publication Education Campaign for Patient-Centered Prescription Container Labels

Attachment 2

At the January meeting, Kim Brown of the department's Press Office attended the meeting to work with the committee on refining a public outreach campaign to educate patients about the redesigned prescription drug container labels and the ability to obtain oral interpretive services for those with limited English skills. An initial public education campaign was discussed by the committee at its last meeting in July 2010.

Attachment 2 contains the DCA-prepared list of proposed communication strategies for the new requirements. Promotion of the new requirements could include press releases, articles, speakers, and an informational video.

The issue for the board is an appropriate date to alert the public about the new requirements for patient-centered prescription labels. Since some pharmacies have advised the board that they are still working to secure the ability to print the new labels, the board should be cautious about creating a demand for something before it is fully available. One date the board could consider to begin publicizing more widely the requirements could be March 2011, in conjunction with National Consumer Protection Week (March 6-12, 2011).

While several of the outreach strategies may not be ready by a March date (i.e., the informational video), other components could readily be released (speakers, press release, articles). Michael Negrete of the Pharmacy Foundation of California agreed to work with the executive officer and Ms. Brown to provide detailed background on the importance of the new labels and interpretive services requirements.

During the January committee meeting, the committee encouraged the release of materials to non-English speaking media outlets as well.

Ms. Brown will attend the February Board Meeting to provide more details and obtain board input.

4. FOR INFORMATION: Development of Consumer Education Videos for the Board of Pharmacy's Web Site

Attachment 3

Background:

At the end of 2009, the Board of Pharmacy worked with the Department of Consumer Affairs and a private vendor to develop a three minute video for consumers about how patients can prevent receiving a medication error. This video is available on the board's Web site.

The board and department were pleased with this video. After production of this video, the board's staff expressed an interest to the Department of Consumer Affairs in developing additional videos. Meanwhile, the DCA had hired video staff of its own, and thus could produce future videos in-house.

A draft video on the dangers of purchasing drugs on the Internet (and how to do so wisely) was prepared in July 2010, but reviewers did not believe the completed video was adequate, so a new script was developed.

One part of the public education campaign for patient-centered labels also includes development of a video.

Update:

The committee discussed the new manuscript for the Internet video during the meeting. **Attachment 3** contains this script.

Planned completion of this video is by July 1, 2011. The video will be shown at the May Board Meeting if it is completed earlier.

5. FOR INFORMATION: Update on Development of Consumer Education Fact Sheets by California School of Pharmacy Interns

Background:

The board has advocated a proposal by the committee to integrate pharmacy students into public outreach activities. The intent is to offer students an

opportunity to work with the board on meaningful projects promoting consumer education, while the board benefits from production of the materials. Several years ago, multiple facts sheets were developed in collaboration with the UCSF Center for Consumer Self-Care, but funding issues prevented their further participation. The board offered other schools of pharmacy the opportunity to have their students develop one-page fact sheets on various topics, and have the fact sheets reviewed by an expert. Schools of Pharmacy expressed interest in this project.

At the January Committee Meeting:

The board previously provided a fact sheet template, guidelines, and potential topics to all schools of pharmacy. Five schools confirmed their interest in the project, and materials from two schools have been submitted to the board for review. The committee reviewed the unedited copies of the materials sent to the board were during the meeting.

The committee discussed whether the content provided in the unedited fact sheets was getting the right message across to consumers.

While the draft fact sheets submitted had some good information, not all materials conformed to the template and guidelines developed by the board. Also, the drafts submitted for review are usually not refined enough to convert directly into a good fact sheet for consumers. Some submissions contained references, while others did not indicate the source of the content. Several also provided medical advice to consumers, which is outside the scope of the board which can provide information but not medical advice.

The committee expressed appreciation for the efforts and imagination of the students.

Staff will need to work on refining the fact sheets, and fully research the facts stated in them before they can be released to the public. Over time, more specific instructions may provide the students and faculty with better guidance, but there will always be need for editing and reviewing by the board.

6. FOR INFORMATION: Balancing Providing Important Consumer Information vs. Consumer Indifference to Reading Extensive Important Warnings in Public Education Materials

Attachment 4

The committee discussed an October 2010 article entitled, “Supreme Court Chief Justice Admits He Doesn’t Read Online EULAs or Other Fine Print.” In the article, Richard Posner admitted to not reading boilerplate legalese on his

mortgage agreement or reading the fine print on websites or medicines. **Attachment 4**.

This item was added to the committee meeting's agenda for discussion purposes. The purpose was to note that there must be a balance between providing consumer information with the human tendency to disregard too much information. This matter lies at the heart of effective consumer and licensee education. Information needs to be conveyed, but too much information will have the opposite effect because the reader may totally disregard the message.

Chair Brooks stated that sometimes "less is more" and the committee should be mindful not to bombard consumers with too much information. There could be unintended consequences when trying to provide relevant information on posters, a label, a video, or any other form of communication.

7. FOR INFORMATION: Suggestions from Pharmacists Planning Services, Inc., on a Redesigned Notice to Consumers

Attachment 5

Pharmacists Planning Services, Inc. recently sent two posters for consideration by the board (**Attachment 5**). One poster was designed with the intent of placement in pharmacies, and the other was designed to post in prescribers' offices.

The committee discussed these posters during its meeting. While the posters were simple and straightforward, neither complied with the legal requirements for information that must be provided to patients by Business and Professions Code Sections 4122 and 733(f).

Additionally the board has decided to develop two consumer advisements for posting in a pharmacy -- one notice will relate to the right of patients to request a 12-point font printed on their prescription labels, the other will relate to the right of patients to have access to interpretative services. These statements will need to be meshed with the already required notice to consumers text.

The board is currently working on new notices under the Legislation/Regulation portion of the board meeting. Consolidating the four notices is important, so that patients are not overwhelmed with too much information.

Regarding PPSI's materials, the committee noted that in a form other than board's notice to consumer posters, these notices could still be effective in educating the public.

8. FOR INFORMATION: Assessment of the Board's Public Education Materials

At a prior meeting, Board Members Debbie Veale and Ramón Castellblanch agreed to work as a subcommittee to assess the board's public education materials. To assist in that effort, board staff subsequently prepared a list of all 50 State Boards of Pharmacy and their corresponding consumer information (**Attachment 6**).

The list clearly displays the board's dominance in this area with its extensive list of consumer and licensee educational materials. The assessment underway by the committee will consider whether the board is focusing on the right areas. The committee believes that the first priority is to find a better way to display the information on the Web site so that it is easier to find a specific item, rather than using an alphabetic list of each title. Consumers would benefit if the board highlights the resources already posted on its website by improving the way information is presented.

The subcommittee will continue their review, and report back to the next Communication and Public Education Committee meeting.

9. FOR INFORMATION: Public Education Materials Under Development and Proposed for the Future

The committee intends to work on refining the new fact sheets under development by school of pharmacy interns.

Additionally, there are four publications that are currently being developed by staff:

- Questions and answers relating to the board's compounding regulations. The questions and answers relate to a discussion held at the June 2010 Enforcement Committee, and an ongoing number of questions being asked of the board regarding the compounding regulations. A subcommittee of board members worked with board senior staff to refine the responses which will be considered at this board meeting under the Enforcement Committee Report.
- The Pharmacists Recovery Program (update)
- Becoming a Licensed Pharmacist in California
- Guidance to Pharmacies on the E-Prescribing of Controlled Substances

Also underway are the revisions of the self-assessment forms for community pharmacies, hospital pharmacies, and wholesalers. These self assessments are being updated by staff, and must be promulgated as regulations.

10. FOR INFORMATION: Update on *The Script*

The February 2011 issue of *The Script* is being finalized will be submitted to DCA's Legal Office for review in the very near future. The February 2011 issue will focus on new pharmacy law and regulations for 2011. The issue will also include an update for licensees about the requirements for patient-centered prescription labels, an article about medication errors reported to the board during 2009/10, and the board's citation and fines issued for those errors.

Thereafter work will soon begin on the July 2011 edition of *The Script*. The July 2011 issue will highlight questions and answers regarding pharmacy law.

11. FOR INFORMATION: Update on Public Outreach Activities

Background:

Public and licensee outreach activities performed during the second quarter of Fiscal Year 10/11 include:

- September 27, 2010 – Inspector Wong provided information about Board of Pharmacy enforcement activities to students at California Northstate School of Pharmacy
- October 22, 2010 – Executive Officer Herold presented information about the 2010 legislative year at Seminar 2010, the annual meeting of the California Society of Health System Pharmacists (CSHP) in San Francisco
- October 22-23, 2010 – Executive Officer Herold and Inspector Hokana staffed the board's public information booth at CSHP's Seminar 2010
- November 9, 2010 – Executive Officer Herold presented information on e-prescribing and e-prescribing of controlled drugs to attendees of a CalERx Conference in Oakland
- December 15, 2010 – Executive Officer Herold provided a presentation on California's patient-centered prescription container label requirements at a quarterly meeting of the California Hospital Association's Medication Safety Committee

12. FOR INFORMATION: Minutes of January 10, 2011 Meeting

Attachment 7

Minutes of the meeting held January 10, 2011 are provided in **Attachment 7**.

b. FOR INFORMATION: Second Quarterly Report on Committee Goals for 2010/11

Attachment 8

Attachment 8 contains a copy of the second quarter's Committee Goals.

Attachment 1
Emergency Contraception Protocol Requirements and Fact Sheet

4052.3. Emergency Contraception Drug Therapy; Requirements and Limitations

(a) Notwithstanding any other provision of law, a pharmacist may furnish emergency contraception drug therapy in accordance with either of the following:

(1) Standardized procedures or protocols developed by the pharmacist and an authorized prescriber who is acting within his or her scope of practice.

(2) Standardized procedures or protocols developed and approved by both the board and the Medical Board of California in consultation with the American College of Obstetricians and Gynecologists, the California Pharmacist Association, and other appropriate entities. Both the board and the Medical Board of California shall have authority to ensure compliance with this clause, and both boards are specifically charged with the enforcement of this provision with respect to their respective licensees. Nothing in this clause shall be construed to expand the authority of a pharmacist to prescribe any prescription medication.

(b) Prior to performing a procedure authorized under this paragraph, a pharmacist shall complete a training program on emergency contraception that consists of at least one hour of approved continuing education on emergency contraception drug therapy.

(c) A pharmacist, pharmacist's employer, or pharmacist's agent may not directly charge a patient a separate consultation fee for emergency contraception drug therapy services initiated pursuant to this paragraph, but may charge an administrative fee not to exceed ten dollars ($10) above the retail cost of the drug. Upon an oral, telephonic, electronic, or written request from a patient or customer, a pharmacist or pharmacist's employee shall disclose the total retail price that a consumer would pay for emergency contraception drug therapy. As used in this subparagraph, total retail price includes providing the consumer with specific information regarding the price of the emergency contraception drugs and the price of the administrative fee charged. This limitation is not intended to interfere with other contractually agreed-upon terms between a pharmacist, a pharmacist's employer, or a pharmacist's agent, and a health care service plan or insurer. Patients who are insured or covered and receive a pharmacy benefit that covers the cost of emergency contraception shall not be required to pay an administrative fee. These patients shall be required to pay copayments pursuant to the terms and conditions of their coverage. The provisions of this subparagraph shall cease to be operative for dedicated emergency contraception drugs when these drugs are reclassified as over-the-counter products by the federal Food and Drug Administration.

(d) A pharmacist may not require a patient to provide individually identifiable medical information that is not specified in Section 1707.1 of Title 16 of the California Code of Regulations before initiating emergency contraception drug therapy pursuant to this section.

(e) For each emergency contraception drug therapy initiated pursuant to this section, the pharmacist shall provide the recipient of the emergency contraception drugs with a standardized factsheet that includes, but is not limited to, the indications for use of the drug, the appropriate method for using the drug, the need for medical followup, and other appropriate information. The board shall develop this form in consultation with the State Department of Public Health, the American College of Obstetricians and Gynecologists, the California Pharmacists Association, and other health care organizations. The provisions of this section do not preclude the use of existing publications developed by nationally recognized medical organizations.

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§1746. Emergency Contraception.

(a) A pharmacist furnishing emergency contraception pursuant to Section 4052 (a)(8)~~(ii)~~ of the Business and Professions Code shall follow the protocol specified in subdivision (b) of this section.

(b) Protocol for Pharmacists Furnishing Emergency Contraception (EC).

(1) Authority: Section 4052 of the California Business and Professions Code authorizes a pharmacist to furnish emergency contraception pursuant to the protocols specified in Business and Professions Code section 4052.3. Use of the following protocol satisfies that requirement.

(2) Purpose: To provide access to emergency contraceptive medication within required limits and ensure that the patient receives adequate information to successfully complete therapy.

(3) Procedure: When a patient requests emergency contraception the pharmacist will ask and state the following:

• Are you allergic to any medications?

• Timing is an essential element of the product's effectiveness. EC should be taken as soon as possible after unprotected intercourse. Treatment may be initiated up to five days (120 hours) of unprotected intercourse. EC effectiveness declines gradually over five days and EC use will not interfere with an established pregnancy.

(4) The pharmacist shall provide the fact sheet and review any questions the patient may have regarding EC. In addition, the pharmacist shall collect the information required for a patient medication record by Section 1707.1 of Title 16 of the California Code of Regulations.
Fact Sheet: The pharmacist will provide the patient with a copy of the current EC fact sheet approved by the Board of Pharmacy as required by Business and Professions Code section 4052b(3).

(5) Referrals and Supplies: If emergency contraception services are not immediately available at the pharmacy or the pharmacist declines to furnish pursuant to conscience clause, the pharmacist will refer the patient to another emergency contraception provider. The pharmacist shall comply with all state mandatory reporting laws, including sexual abuse laws.

(6) The pharmacist may provide up to 12 non-spermicidal condoms to each Medi-Cal and Family PACT client who obtains emergency contraception.

(7) Advanced provision: The pharmacist may dispense emergency contraception medication for a patient in advance of the need for emergency contraception.

(8) EC Product Selection: The pharmacist will provide emergency contraception medication compatible with product information from the list of products specified in this protocol. This list must be kept current and maintained in the pharmacy. Along with emergency contraception products, the list will include adjunctive medications indicated for nausea and vomiting associated with taking EC. Patients will be provided information concerning dosing and potential adverse effects.

(9) Documentation*:* Each prescription authorized by a pharmacist will be documented in a patient profile as required by law.

(10) Training: Prior to furnishing emergency contraception, pharmacists who participate in this protocol must have completed a minimum of one hour of continuing education specific to emergency contraception.

(11) Brands and Doses of Oral Contraceptive Tablets Used for Emergency Contraception

Dedicated Emergency Contraception				
Brand	Manufacturer	Tablets per Dose	EthinylEstradiol per Dose (mg)	Levonorgestrel per Dose (mg)**

One Dose Regimen				
Plan B	Duramed	2 tablets	0	1.5
Two Dose Regimens				
Plan B	Duramed	1 tablet per dose	0	0.75
Preven	Duramed	2 tablets per dose	100	0.50
Oral Contraceptive Pills				
Brand	Manufacturer	Tablets per Dose (two doses 12 hoursapart *)	Ethinyl Estradiol per Dose (mg)	Levonorgestrel per Dose (mg)*
Levora	Watson	4white tablets	120	0.60
Ovral	Wyeth	2 white tablets	100	0.50
Ogestrel	Watson	2 white tablets	100	0.50
Nordette	Wyeth	4 light-orange tablets	120	0.60
Tri-Levlen	Berlex	4 yellow tablets	100	0.50
Alesse	Wyeth	5 pink tablets	100	0.50
Aviane	Duramed	5 orange tablets	100	0.50
Triphasil	Wyeth	4 yellow tablets	120	0.50
Levlen	Berlex	4 light-orange tablets	120	0.60
Trivora	Watson	4 pink tablets	120	0.50
Levlite	Berlex	5 pink tablets	100	0.50
Lo/Ovral	Wyeth	4 white tablets	120	0.60
Low-Ogestrel	Watson	4 white tablets	120	0.60
Ovrette	Wyeth	20 yellow tablets	0	0.75

(12) Anti-nausea Treatment Options for use with Emergency Contraception

Drug	Dose	Timing of Administration
Non-prescription Drugs		
Meclizine hydrochloride (Dramamine II, Bonine)	One or two 25 mg tablets	1 hour before first EC dose; repeat if needed in 24 hours
Diphenhydramine hydrochloride (Benadryl)	One or two 25 mg tablets or capsules.	1 hour before first EC dose; repeat as needed every 4-6 hours
Dimenhydrinate (Dramamine)	One or two 50 mg tablets or 4-8 teaspoons liquid	30 minutes to 1 hour before first ECP dose; repeat as needed every 4-6 hours
Cyclizine hydrochloride (Marezine)	One 50 mg tablet	30 minutes before first EC dose; repeat as needed every 4-6 hours

Authority cited: Section 4005, Business and Professions Code. Reference: Section 4052 and 4052.3, Business and Professions Code.

emergency contraception

Key Facts About Emergency Contraception

Emergency Contraception (EC) is a safe and effective way to prevent pregnancy after sex.

Consider using Emergency Contraception if:

- You didn't use a contraceptive during sex, or
- You think your contraceptive didn't work.

What are Emergency Contraceptive pills?

Emergency Contraceptive pills contain the same medication as regular birth control pills, and help to prevent pregnancy. There are two basic types of Emergency Contraceptive pills:

- Plan B™ progestin-only pills
- High doses of regular oral contraceptive pills.

Don't wait! Take EC as soon as possible.

- It is best to take EC within three days of unprotected sex.
- The sooner you take EC the more effective it is.
- For more information talk to your pharmacist or doctor.

EC is safe and effective.

- Progestin-only pills reduce the risk of pregnancy by 89 percent.*
- Combined estrogen/progestin pills reduce the risk of pregnancy by 75 percent.*
- For regular, long-term use, other contraceptive methods are more effective than EC.
- Emergency Contraceptive pills do not protect against sexually transmitted infections, including HIV/AIDS.

** Pregnancy risk reduction based on one-time use.*

EC won't cause an abortion.

- Emergency Contraceptive pills are NOT the same as RU-486 (the abortion pill).
- Emergency Contraceptive pills are not effective after pregnancy has occurred and cannot interrupt it.

EC won't harm a developing fetus.

- If Emergency Contraceptive pills are taken mistakenly during pregnancy, they will not harm the developing fetus.
- Using Emergency Contraceptive pills will not affect a woman's ability to become pregnant in the future.

Women can keep pills at home in case of an emergency.

- Many women find it convenient to have Emergency Contraceptive pills on hand in case of an emergency.
- Medical providers or your pharmacist can provide Emergency Contraceptive pills before they are needed.

Medical follow-up after taking Emergency Contraceptive pills

- If you don't get a normal period within three weeks, take a pregnancy test.
- It is important to visit your doctor or clinic if you need a regular birth control method or information about preventing sexually transmitted infections, such as HIV/AIDS.

In California all women and men with eligible incomes may receive free family planning services through Family PACT.

If you don't have a doctor or clinic, call 1-800-942-1054 to find a Family PACT provider near you.

Approved by the California State Board of Pharmacy
Revised July 2004 • Printed by Pharmacy Access Partnership

Attachment 2

Communication Strategies for Patient Centered Labels

Patient Centered Labels: a Consumer Protection

Labels on prescription bottles provide critical information for the patient/caregiver on the identity of the medication, strength, dosage, and directions for taking the medication. New labeling regulations requiring pharmacists to use larger type font will help reduce the number of errors that arise when patients/caregivers cannot clearly read the text.

Objective

The goal of the communications campaign is to raise awareness among consumers about the new labeling requirements and the advantages to the consumer.

Strategies

1. Produce press release and send to news outlets statewide, explaining the new regulations, when the regulations take effect and the value of the new labels to consumers.

2. Hold media event during Consumer Protection Week, March 6 - 12.
    a. Reach out to Senator Corbett's office for March press conf.

3. Repurpose press release as article to be sent to target websites/publications, such as
    a. Seniors publications, high-traffic blogs on senior issues
    b. pharmacy associations' websites/publications
    c. medical associations' websites/publications
    d. Ethnic media: Chinese and Hispanic radio stations
    e. DCA Consumer Connection, Spring issue

4. Video

    Create a brief (under 2 minutes) video for the TakeCharge consumer education video series – highlighting the advantages of the label.

    Note: this can't be done before March event.

5. Tip Card

    Produce tip card (using TakeCharge tip card format) for consumers, listing advantages of the new label.
    a. Outreach Unit will distribute tip card at DCA outreach events.

Attachment 3

Proposed Script for Internet Video

DCA Office of Public Affairs Consumer Education Videos:

Buying Prescription Drugs Online: What You Need to Know

Script, version 11-08-2010

Spokesperson standsadjacent to a PC screen and keyboard.

PC screen shows an online pharmacy site.(We have a dummy site that has a generic online pharmacy look.)

The video – in its final, edited form- will move between the spokesperson, the PC screen, and cutaways, as needed to punctuate the message conveyed by the spokesperson.

Spokesperson:

Buying prescription drugs online is appealing …

especiallyfor those of us who want to buy our medications in the privacy of our home and have them delivered to our doorstep.

So what could be bad about buying your medications this way?

Plenty – if you don't know what to watch out for.

Tap water instead of eye drops? Wheat flour, the active ingredient in a contraceptive?

How about turmeric as a replacement for your antibiotic?

These are some of the ingredients that have been found in counterfeit prescription drugs that were purchased online …

by unsuspecting consumers.

The problem is that anyone can build a website that looks like a real pharmacy site.

In fact, 95% of all online pharmacy sites are not operating within the law .

And are not licensed by the state.

Don't trust your health ***or*** your credit card information to an illegal pharmacy site.

An unlicensed pharmacy can't buy drugs from a legitimate manufacturer, so there is no way of telling WHAT'S in those pills they're selling …

or where or how the drugs were made.

People have gotten sick, even died from taking counterfeit medications.

But there is something you can do to make sure you're using a safe pharmacy site …

First, check for the VIPPS seal.

VIPPS stands for Verified Internet Pharmacy Practice Site –

It's the seal of approval from the National Association of State Boards of Pharmacy.

The state boards are the ones that regulate and license pharmacies – even those on the internet.

Second, make sure the pharmacy you choose is licensed by the California State Board of Pharmacy.

You can look up the name of the pharmacy on our license look-up page.

Buying your prescription drugs online can be fast, easy and comfortable.

Just make sure you're buying from a safe, licensed pharmacy site.

If you have any doubts about the legitimacy of a pharmacy site you are using, call our toll free number. 800-952-5210.

[Pharmacy Board and DCA logos at end of video]

Attachment 4

Balancing Consumer Information . . .

Supreme Court Chief Justice Admits He Doesn't Read Online EULAs Or Other 'Fine Print'

from the *so-why-are-they-binding?* dept

We just recently wrote about how circuit court judge Richard Posner had admitted to not reading the boilerplate legalese on his mortgage agreement, and wondered why such things were then considered binding. Taking it up a notch, now Supreme Court Chief Justice John Roberts has admitted that he doesn't read the fine print on websites or medicines and that this "is a problem."

Answering a student question, Roberts admitted he doesn't usually read the computer jargon that is a condition of accessing websites, and gave another example of fine print: the literature that accompanies medications.... It has "the smallest type you can imagine and you unfold it like a map," he said. "It is a problem," he added, "because the legal system obviously is to blame for that." Providing too much information defeats the purpose of disclosure, since no one reads it, he said. "What the answer is," he said, "I don't know."

Source: http://www.techdirt.com/articles/20101021/02145811519/supreme-court-chief-justice-admits-he-doesn-t-read-online-eulas-or-other-fine-print.shtml

Attachment 5

Before You Check out Check with your Pharmacist:

You Should Know:

- ☑ The names of your medications.
- ☑ What each medication should be used for.
- ☑ How and when should you take it.
- ☑ If there are any side effects.
- ☑ What other medications, foods, or herbals should not be taken.

Talk to Your Pharmacist . . .

it Can Save Your Life.

California State Board of Pharmacy

1625 North Market Blvd, Suite N219 Sacramento, CA 95834

www.pharmacy.ca.gov 916.445.5014

Before You Check out
Check with your Health Provider:

You Should Know:

- ☑ The names of your medications.
- ☑ What each medication should be used for.
- ☑ How and when should you take it.
- ☑ If there are any side effects.
- ☑ What other medications, foods, or herbals should not be taken.

Talk to Your Health Provider or Pharmacist. . .
it Can Save Your Life.

University of California
UCSF
School of Pharmacy

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www.pharmacy.ca.gov 916.445.5014

UCSF Center for Consumer Self Care
3333 California St. San Francisco, CA 94143-0613

Attachment 6

CONSUMER MATERIALS PROVIDED BY U.S. STATE BOARDS OF PHARMACY

(12/23/10)

State boards of pharmacy provide materials about licensure and disciplinary actions. Some boards also provide 'consumer education' information. Most material is not original content created by a board; it is medication-safety information provided through a direct link to another webpage, or a link to a PDF document created by another entity. In alphabetical order, this list indicates information from state boards, intended to educate/inform consumers. Consumer education is not limited to printed brochures and fact sheets. Relevant information is also provided in patient safety videos.

Alabama State Board of Pharmacy - http://www.albop.com

- filing a complaint against a licensee
- Medication-related patient safety videos created by FDA and ISMP (42 videos)
- Internet Crime Complaint Center
- DEA Diversion Control Program
- MEDLINE PLUS
- AHRQ - Patient Safety Network
- Poison Control
- CDC Emergency Preparedness
- Drug Enforcement Agency
- Orange Book - Approved Drug Products w/Therapeutic Equivalence Evaluations
- FDA MEDWATCH

Alaska Board of Pharmacy - http://www.commerce.state.ak.us/occ/ppha.htm

- filing a complaint against a licensee
- U.S. Department of Justice letter relating to buying drugs on the Internet

Arizona State Board of Pharmacy - http://www.azpharmacy.gov

- filing a complaint against a licensee
- Patient Medication Forms used to facilitate medication reconciliation
- Proper Disposal of Prescription Drugs (Office of National Drug Control Policy)
- Disposal By Flushing of Certain Unused Medicines (FDA)
- Instructional video - Disposing of medication (whitehousedrugpolicy.gov)
- Patient Immunization Fact Sheet
- Flu.gov – What To Do About The Flu (U.S. Dept. of Health & Human Services)

Arkansas State Board of Pharmacy - http://www.arkansas.gov/asbp

- filing a complaint against a licensee

California State Board of Pharmacy - http://www.pharmacy.ca.gov

- filing a complaint against a licensee
- Informational video - Avoiding Medication Errors
- Bringing prescription drugs into the U.S. from foreign countries
- Counterfeit Drugs
- Diabetes - Engage Your Health Team
- Did You Know? Good Oral Health Means Good Overall Health
- Do you understand the directions on your Rx medicine label?
- Drug discount programs
- Ever Miss a Dose of Your Medicine?
- Generic Drugs
- Is Your Medicine in the News?
- Lower Your Drug Costs
- Measuring Liquid Medicine
- Pill Splitting
- Thinking of Herbals?
- Traveling Medicine Chest
- Vaccinations and Travel Outside the U.S.
- What's the Deal with Double Dosing? Too Much Acetaminophen, That's What!
- Consumer Reports - Best Buy Drugs
- Antibiotics - A National Treasure
- DEA Heads First-ever Nationwide Prescription Drug Take-back Day
- Emergency Contraception Information
- FDA Recalls, Market Withdrawals, and Safety Alerts
- Drugs@FDA, (database with detailed Information FDA-approved drugs)
- FDA Safety Information and Adverse Event Reporting Program
- Health Notes - Pain Management
- Health Notes - Alternative Medicines
- Health Notes - Women's Health
- Health Notes - Quality Assurance
- Health Notes - Pharmacist Involvement in Anticoagulant Therapy
- Health Notes - Care of Children & Adults with Developmental Disabilities
- Health Notes - Drug Therapy Considerations in Older Adults
- Medicare Drug Pricing Inquiry
- Medicare Part D Information
- Medication Safety and Drug Interaction Checker Web Sites
- Drug Facts Label - NCPIE
- Patient Consultation information
- Patients' Bill of Rights
- Pill-Splitting Pros - Pill-Splitting Cons
- Prescription Price Assistance Program
- Take Charge of Your Medication Use!
- Tips to Save You Money When Buying Prescription Drugs
- Children and Their Medicines
- How to Take Your Pain Medications Effectively and Safely
- Get the Answers! Talk to a Pharmacist

Colorado State Board of Pharmacy - http://www.dora.state.co.us/pharmacy

- filing a complaint against a licensee
- Checklist relating to buying drugs on the Internet

Connecticut Commission of Pharmacy - http://www.ct.gov/dcp/site/default.asp

- filing a complaint against a licensee
- Some Medications and Driving Don't Mix
- What You Should Know about Prescription Drug Advertisements
- Oxycodone: Protect Your Teens
- Prescription Drug Abuse Among Teens
- Buying Prescription Medication On-line
- Medication Safety: Who's at Risk & What You Can Do
- Safe Storage and Disposal of Prescription Medication
- Opioids: What You Need to Know
- Protecting Yourself from Prescription Errors

Delaware State Board of Pharmacy – http://www.dpr.delaware.gov/boards/pharmacy/index.shtml

- filing a complaint against a licensee
- FDA guidelines for drug disposal

District of Columbia Board of Pharmacy -
http://hpla.doh.dc.gov/hpla/cwp/view,A,1195,Q,488414,hplaNav,%7C30661%7C,.asp

- filing a complaint against a licensee
- Dangers of buying drugs on the Internet (NABP)

Florida Board of Pharmacy - http://www.doh.state.fl.us/mqa/pharmacy/

- filing a complaint against a licensee
- Florida Discount Drug Card
- Information about dietary supplements for sexual enhancement (FDA)

Georgia State Board of Pharmacy – http://sos.georgia.gov/plb/pharmacy/

No consumer education materials shown, except for a link to their poison control center.

Hawaii State Board of Pharmacy - http://www.hawaii.gov/dcca/areas/pvl/boards/pharmacy

- filing a complaint against a licensee

Idaho State Board of Pharmacy - http://www.idaho.gov/bop

- filing a complaint against a licensee
- List of 'no-questions-asked' medication disposal sites

Illinois State Board of Pharmacy – http://www.idfpr.com/dpr/WHO/phar.asp

- filing a complaint against a licensee

Indiana Board of Pharmacy - http://www.in.gov/pla/pharmacy.htm

- filing a complaint against a licensee
- www.Indianaconsumer.com (information for low-income residents to pay for medication)

Iowa Board of Pharmacy - http://www.state.ia.us/ibpe

- filing a complaint against a licensee

Kansas State Board of Pharmacy - http://www.kansas.gov/pharmacy

- filing a complaint against a licensee
- Kansas Senior Pharmacy Assistance Program, and other Medicare discount cards

Kentucky Board of Pharmacy - http://pharmacy.ky.gov/

- filing a complaint against a licensee

Louisiana Board of Pharmacy - http://www.pharmacy.la.gov

- filing a complaint against a licensee

Maine Board of Pharmacy –
http://www.maine.gov/pfr/professionallicensing/professions/pharmacy/index.htm

- filing a complaint against a licensee
- fact sheet for patients/caretakers regarding the use of Tamiflu

Maryland Board of Pharmacy - http://www.dhmh.state.md.us/pharmacyboard/

- filing a complaint against a licensee
- Where to get a flu shot

- Maryland Senior Prescription Drug Assistance Drug Program
- Swine Flu information from the CDC
- Consumer Reports Guidance for Consumers on Prescription Medications
- Overview brochure for consumers about the Maryland Board of Pharmacy
- Maryland Poison Center
- Acetaminophen information sheet
- FDA information about buying drugs on the Internet
- Educate Before You Medicate (NCPIE)
- Medication Safety brochure (2004) from the Maryland Board of Pharmacy
- The Senior Citizens League (rights and freedoms of senior citizens)
- MAC (Maintaining Active Citizens) – promoting well-being full participation in society
- Medicare information - hospital and medical insurance for people 65 and older
- Senior Med (residents living in assisted living, specialty care, independent communities)
- Buying Drugs from Foreign Countries - Importation
- What is Bioterrorism?
- Should I be Vaccinated for Smallpox?
- What is Botulism?
- What is Plague?
- What is Smallpox?
- What is Anthrax?

Massachusetts Board of Registration in Pharmacy - http://www.mass.gov/reg/boards/ph

- filing a complaint against a licensee
- Talk to Your Pharmacist
- Before Taking Any Medication
- Patient Counseling
- Getting Your Prescription Filled Online (NABP)
- Getting Your Prescription Filled Abroad (FDA)
- Importation of Prescriptions (FDA)
- What should patients look for when receiving a prescription medication?
- What should patients do if they think there has been an error in their medication?
- MassMedLine (prescription medication assistance program)

Michigan Board of Pharmacy - http://www.michigan.gov/mdch/0,1607,7-132-27417_27529_27548-59186--,00.html

- filing a complaint against a licensee
- medical marijuana
- pain and symptom management
- Patient Safety in a Hospital Setting
- Patient Safety in an Office Setting
- Patient Safety in a Nursing Home
- Patient Safety in a Home Health Setting
- State/Federal Regulatory Authorities Combat Rogue Internet Drug Distributors (NABP)

- Herbal-Drug Interactions (McGuire VA Medical Center)
- Buying Medicines and Medical Products Online (FDA)
- Everything to know about antibiotics (Council for Affordable Quality Health Care)
- Safe Medication Use (Massachusetts Coalition for Prevention of Medical Errors)
- Think it Through – Benefits & Risks of Medicines (Partnership for Safe Medication Use)
- Institute for Safe Medication Practices (ISMP)
- My Medication Record (AARP)
- Over-the-counter Safety Tips (AARP)
- SafeMedications.com
- Rex - the Talking Prescription Bottle

Minnesota Board of Pharmacy - http://www.pharmacy.state.mn.us/

- filing a complaint against a licensee

Mississippi Board of Pharmacy - http://www.mbp.state.ms.us

No consumer information found on Mississippi's website.

Missouri Board of Pharmacy - http://www.pr.mo.gov/pharmacists.asp

- filing a complaint against a licensee
- FDA Consumer Updates
- Disposing of unused medication (Office of National Drug Control Policy)
- Missouri Bureau of Narcotics and Dangerous Drugs (BNDD)
- Disposal by Flushing of Certain Unused Medicines (FDA)
- How to Dispose of Unused Medicine (FDA)
- SMARxT Disposal (materials and video)
- Flu.gov – What to Do About the Flu (U.S. Dept. of Health & Human Services)
- Reporting suspicious internet drug sales (DEA)
- MO Healthnet (Missouri Medicaid)
- Medicare.gov

Montana Board of Pharmacy - http://mt.gov/dli/bsd/license/bsd_boards/pha_board/board_page.asp

- filing a complaint against a licensee
- Prescription Drug Disposal (Office of National Drug Control Policy)
- A Remedy for Residential Drug Disposal (Michigan state agency document)
- Prescription Drug Disposal (Arizona state agency document)

Nebraska Board of Pharmacy – http://www.dhhs.ne.gov/crl/medical/pharm/pharmlic/procedures.htm

- filing a complaint against a licensee

Nevada State Board of Pharmacy - http://bop.nv.gov

- filing a complaint against a licensee
- VIPPS (Verified Internet Pharmacy Practice Sites)

New Hampshire Board of Pharmacy - http://www.nh.gov/pharmacy

- filing a complaint against a licensee
- Emergency Contraception
- Safe Medication Disposal
- Talking With Your Teen About Buying Drugs on the Internet
- Syringe Access Initiative

New Jersey Board of Pharmacy – http://www.state.nj.us/lps/ca/pharm/

- filing a complaint against a licensee
- New Jersey Prescription Drug Price Registry (consumers compare retail prices)
- New Jersey Board of Pharmacy Consumer Brief
- U.S. DOJ – DEA Office of Diversion Control
- Institute For Safe Medication Practices (ISMP)

New Mexico Board of Pharmacy - http://www.rld.state.nm.us/Pharmacy/

- filing a complaint against a licensee
- medical marijuana
- drug disposal information
- drug assistance programs

New York State Board of Pharmacy – http://www.op.nysed.gov/prof/pharm/

- What You Should Know About Pharmacists and Their Services
- New York's Professional Misconduct Enforcement System (complaints)

North Carolina Board of Pharmacy - http://www.ncbop.org

- Consumer FAQs - one question and answer each on these topics:
  - Air Travel with Medications
  - Brand Name Prescriptions vs. Generic Prescriptions
  - Drug Disposal
  - Drug Safety
  - Emergency Contraception (EC)
  - Expiration Dates
  - Filing a Complaint
  - Flu Vaccine

- FluMist®
- Free Prescriptions
- Generic Labels
- Medication Safety
- Medications - What can I take with me on flights?
- Methamphetamine Act
- Outdated Drugs
- Patient-Assistance Programs
- "Plan B" (Emergency Contraception)
- Prescription Records
- Prescription Return Policy
- Privacy Protection
- Pseudoephedrine Products
- Quinine Sulfate
- Sharing Prescriptions
- Transferring Prescriptions

North Dakota State Board of Pharmacy - http://www.nodakpharmacy.com

- filing a complaint against a licensee
- Drug Disposal
- Questions To Ask Your Pharmacist
- Pharmacy Patients Bill of Rights

Ohio State Board of Pharmacy - http://www.pharmacy.ohio.gov

- Consumer guide (overview of state board, and limited information re complaints)

Oklahoma State Board of Pharmacy - http://www.pharmacy.ok.gov

- Video - Road to Nowhere, Prescription Drug Abuse (Oklahoma Pharmacists Association)
- filing a complaint against a licensee
- Charitable pharmacies in Oklahoma (assistance with prescription drug costs)
- Disposemymeds.org

Oregon State Board of Pharmacy - http://www.pharmacy.state.or.us

- filing a complaint against a licensee
- Flu information (Oregon Public Health)
- Oregon Patient Safety Commission
- AARP Personal Guide to Prescription Drugs
- Institute of Medicine Fact Sheet: What you can do to avoid medication errors
- Safe Medication.com
- The Just Culture Community
- Compendium of Best Solutions by National Patient Safety Foundation

- Reducing Medical Errors & Improving Patient Safety (National Coalition on Healthcare)
- CDER - Medication Errors site
- Patient Safety Network (AHRQ)

Pennsylvania State Board of Pharmacy - http://www.dos.state.pa.us/pharm

- filing a complaint against a licensee

Rhode Island Board of Pharmacy - http://www.health.ri.gov/hsr/professions/pharmacy.php

- filing a complaint against a licensee

South Carolina Board of Pharmacy - http://www.llr.state.sc.us/pol/pharmacy

- filing a complaint against a licensee

South Dakota State Board of Pharmacy - http://www.pharmacy.sd.gov

- filing a complaint against a licensee
- How to Dispose of Unused Medication (FDA)
- What Questions Should I Ask My Pharmacist About My Medications?

Tennessee Board of Pharmacy - http://health.state.tn.us/Boards/Pharmacy/index.shtml

- filing a complaint against a licensee
- Why Should You Talk to Your Pharmacist?
- What Should You Tell Your Pharmacist?
- What Does the State Board of Pharmacy Do?
- Did You Know?
- Patient Bill of Rights

Texas State Board of Pharmacy - http://www.tsbp.state.tx.us

- filing a complaint against a licensee
- Facts About Prescription Medicines, Pharmacists and Pharmacies
- Texas Medicare Prescription Information
- Proper Disposal of Prescription Drugs (Office of National Drug Control Policy)
- Consumer Alerts:
  - Internet Sites Operating in Conflict with Patient Safety Standards
  - Buying Foreign Drugs
  - FDA Warning - Avoid Rx Drugs from Certain Websites
  - Counterfeit Drugs
  - Fraudulent Drug Reselling Licenses

Utah Board of Pharmacy - http://www.dopl.utah.gov/

- filing a complaint against a licensee

Vermont Board of Pharmacy – http://vtprofessionals.org/opr1/pharmacists/

No consumer education materials found.

Virginia Board of Pharmacy - http://www.dhp.virginia.gov/pharmacy

- filing a complaint against a licensee
- Pharmacies registered as collection sites for donated drugs
- How to Report Problems With Products Regulated by the FDA
- Disposing of Unwanted Prescription Drugs (Office of National Drug Control Policy)
- Dispensing and Purchasing Controlled Substances Over the Internet (DEA)
- Consumer Safety Alert - Drugs that Should Not Be Purchased On the Internet (FDA)
- Frequently Asked Questions - Verified Internet Pharmacy Practice Sites (VIPPS, NABP)
- Importing Medications - Looks Can be Deceiving (FDA)
- Medicines and You: A Guide for Older Adults (FDA)
- A Guide to Managing the Benefits and Risks of Medicines (FDA)
- FDA Statement Regarding the Anti-Depressant Paxil for Pediatric Population
- Drugs@FDA - approved brand name and generic drugs
- The best way to take your over-the-counter pain reliever (FDA)
- Prescription Drug Assistance Programs Available in Virginia (Department for the Aging)
- FAMIS (Family Access to Medical Insurance Security)

Washington State Board of Pharmacy -
http://www.doh.wa.gov/hsqa/Professions/Pharmacy/default.htm

- filing a complaint against a licensee

West Virginia Board of Pharmacy - http://www.wvbop.com/

- filing a complaint against a licensee

Wisconsin Pharmacy Examining Board –
http://www.drl.state.wi.us/board_detail.asp?boardid=46&locid=0

- filing a complaint against a licensee

Wyoming State Board of Pharmacy - http://pharmacyboard.state.wy.us/

- filing a complaint against a licensee

Attachment 7

California State Board of Pharmacy
1625 N. Market Blvd, N219, Sacramento, CA 95834
Phone: (916) 574-7900
Fax: (916) 574-8618
www.pharmacy.ca.gov

STATE AND CONSUMER SERVICES AGENCY
DEPARTMENT OF CONSUMER AFFAIRS
GOVERNOR EDMUND G. BROWN JR.

STATE BOARD OF PHARMACY
DEPARTMENT OF CONSUMER AFFAIRS
COMMUNICATION AND PUBLIC EDUCATION COMMITTEE
MINUTES

DATE: January 10, 2011

LOCATION: Department of Consumer Affairs
1625 N. Market Blvd., 1st Floor Hearing Room
Sacramento, California 95834

COMMITTEE MEMBERS PRESENT: Ryan Brooks, Public Member, Chair
Ramón Castellblanch, PhD., Public Member
Shirley Wheat, Public Member
Deborah Veale, RPh

COMMITTEE MEMBER ABSENT: Rosalyn Hackworth, Public Member

STAFF PRESENT: Virginia Herold, Executive Officer
Anne Sodergren, Assistance Executive Officer
Carolyn Klein, Staff Services Manager
Karen Abbe, Public and Licensee Education Analyst
Tessa Miller, Staff Analyst

Call to Order

Communication and Public Education Committee Chairperson Ryan Brooks called the meeting to order at 10:32 a.m. Committee members Ramón Castellblanch, Shirley Wheat, and Deborah Veale were present. Mr. Brooks noted that there was quorum.

Board President Stanley Weisser was in attendance in the audience.

Mr. Brooks welcomed all visitors and attendees in the audience, and wished everyone a happy new year for 2011. Mr. Brooks commended Executive Officer Virginia Herold and board staff for their consumer protection efforts during 2010.

Agenda Items

1. Discussion of the 39th Annual Report of the Research Advisory Panel of California

   Mr. Brooks noted that the Communication and Public Education Committee invited the Research Advisory Panel to send a representative to attend this meeting. The purpose of attending would be to share the activities of the Advisory Panel, and discuss their role in overseeing research involving the use of controlled substances.

   Ms. Herold advised that the executive officer of the Research Advisory Panel was unable to attend today's committee meeting. They hope to send a representative to a future meeting.

   No public comments were provided on this agenda item.

2. Public Education Campaign for Patient-Centered Prescription Drug Container Labels

   Mr. Brooks stated that the meeting materials included a list of proposed communication strategies for the new patient-centered prescription drug container labels. He noted that ideas for a public education campaign were discussed at the last committee meeting. Promotion of the new requirements could include press releases, articles, speakers, and an informational video.

   Ms. Herold acknowledged Kim Brown in attendance, representing the Department of Consumer Affairs Press Office. She advised that Ms. Brown helped develop the list of strategies included in the meeting materials.

   Ms. Herold asked committee members to consider an appropriate date to alert the public about the new requirements for patient-centered prescription labels. She cautioned against creating a demand for something before it was available. Ms. Herold suggested that March 2011 would be an appropriate time to begin a public awareness campaign, in conjunction with National Consumer Protection Week (March 6-12, 2011).

   Ms. Wheat stated that she believed January 1, 2011 was the date that the new requirements would be in effect. She asked Ms. Herold to restate the timelines relating to the new requirements for patient-centered prescription labels.

   Ms. Herold advised that the board was required to promulgate regulations that required, on or before January 1, 2011, a standardized, patient-centered, prescription drug label for all prescription medicine dispensed to patients in

California. The board met that deadline, and the regulations became effective January 1, 2011. She further advised that during pharmacy inspections, board enforcement will have discretion during a transition period, in order to comply with the new regulations. Ms. Herold emphasized that licensees will need time to adopt the regulations promulgated January 1, 2011. For example, board inspectors can use discretion when finding that a pharmacy has not complied with a request from a consumer to print their label in a 12-point font.

Ms. Wheat asked for clarification about the requirement to provide translation services, if requested by a consumer.

Ms. Herold responded by stating that translation services are a separate requirement, but that they are required to be made available to consumers.

Mr. Brooks reiterated that the new requirements for patient-centered prescription labels took effect on January 1, 2011. He acknowledged that patients could initially be denied availability to a larger font, and that board inspectors will have discretion in the regulation regarding enforcement during a transition period.

Ms. Herold stated that full compliance of the new requirements for patient-centered prescription labels will be required, but she could not confirm a date. Enforcement activities will include an assessment of a pharmacy's readiness. For example, a pharmacy could be awaiting a software change from their vendor in order to provide a printed label reflecting a larger font size.

Ms. Veale asked for feedback regarding the idea to create a poster for the public education campaign for patient-centered prescription labels. She asked whether a poster could be created during February 2011, and then have the posters distributed in March 2011.

Ms. Herold responded that it takes at least a year to develop, revise, print, and distribute posters to be displayed in pharmacies in California because the board would need to promulgate a regulation to do this. A March 2011 date to distribute posters would not be attainable.

Dr. Castellblanch stated that he recently received a prescription container from Kaiser reflecting a label printed with a 14-point font. He was pleased with the label, and also noted that CVS provides a good prescription label.

Dr. Castellblanch also commented on readability of any poster(s) included in the public education campaign. He emphasized that wording on a poster should use simple language, and the key information should be fairly conspicuous. Dr. Castellblanch also recommended that a poster should reflect major languages as well.

Mr. Brooks agreed that too much writing distracts from important messages.

Public Comment

Aglaia Panos, Pharm D, President of the Marin County Pharmaceutical Association, provided a copy of her letter addressed to Virginia Herold. Dr. Panos' letter dated January 10, 2011 formally requested that the board place an item on the February 2011 full board meeting agenda. The letter referred to the United States Pharmacopeia (USP) Universal Standards for prescription container labels.

Dr. Panos stated that the Marin County Pharmaceutical Association voted to mandate that the USP Universal Standards be implemented. She noted four specific recommendations designed to eliminate medication errors:

- Give explicit instructions – Instructions should clearly separate the dose itself from the timing of each dose and use numeric characters (e.g., "take 2 tablets in the morning and 2 tablets in the evening' rather than "Take two tablets twice daily").
- Include purpose for use – The medication's purpose should be included on the label unless the patient prefers that it not appear. When included, use clear, simple terms (e.g., "for high blood pressure" rather than "for hypertension").
- Improve readability – The label type should use high-contrast print (e.g. black print on white background); large font size (e.g., MINIMUM 12-point Times New Roman or 11-point Arial); and horizontal text only.
- Limit auxiliary information – Labels, stickers, or other supplemental information should be expressed in simple and explicit language that is minimized to avoid distracting patients with nonessential information.

Mr. Brooks thanked Dr. Panos for her comments, but reminded her that comments regarding patient-centered labels had already been solicited over a period of time. He advised that the current regulations reflect the comments already reviewed and accepted.

Dr. Panos stated that consumers are still not happy with the 10-point minimum font that is required. She expressed concern that the issue should not be considered a 'done deal.'

Mr. Brooks advised that the 10-point font size was set as a minimum, and that there is an option to provide a larger size when requested by a consumer.

Dr. Castellblanch stated that he appreciated Dr. Panos' comments because the regulations require that the board continue to review the requirements. He also noted that by January 1, 2013, the board will be required to report to the Legislature as to the status of implementation of the prescription drug label requirements.

Ms. Herold stated that redesign of prescription drug labels was not agendized for this meeting. This agenda item was directed to publicizing the new changes to consumers and licensees.

Fred Mayer, RPh, MPH, and President of Pharmacists Planning Service, Inc. (PPSI) provided feedback on issues relating to consumer protection. Dr. Mayer stated that he represents 59 consumer groups, and that he has attended many Board of Pharmacy meetings. He asked for clarification regarding the minimum 10-point font. Dr. Mayer asked whether the 10-point font requirements had been 'nationalized' and if so, by whom. He emphasized that it was important to speak in consumer language, not legalese.

Mr. Brooks advised that minimum font size was not an agenda item for today's meeting, and that the purpose was to consider public noticing requirements of the new regulations already in effect.

Ms. Herold reiterated that the committee could only discuss and take action on agendized items. She stated that the noticing requirements will take another year to complete. Ms. Herold acknowledged that not everyone supported the minimum 10-point font, and that there had been discussion regarding a 12-point font. She advised that the board is now focusing on an education program for the new requirements, and that the USP standards were released after the meeting agenda was developed.

Dr. Mayer requested that a discussion regarding the USP standards be placed on the February 2011 board agenda. He emphasized that if the 10-point font size is a 'done deal' then the board should consider whether they made a mistake in light of the USP standards. Mr. Mayer reiterated that he has been an advocate for consumers for more than 10 years.

Mr. Brooks responded that he will work with the board's Executive Officer to develop the agenda for the February 2011 board meeting.

Ms. Veale commented that she believed Mr. Mayer was trying to advocate for a 12-pt font. She suggested that the education campaign include information about the option for requesting a 12-point font.

Dr. Castellblanch supported the idea to place the item on the next board meeting agenda. He stated that the board can discuss the issue at any time. Dr. Castellblanch noted that the issue is appropriate for a later agenda.

Dr. Mayer stated that he and others would appear at the next board meeting.

Ms. Herold advised that an agenda had not yet been developed for the next full board meeting. An agenda will be released, with no less than 10 days notice prior to the meeting.

Dr. Mayer commented on the issue of 'medical indication' and that it should be printed on prescription drug labels. He emphasized that putting medical indication on the label was also a part of patient-centered information. Mr. Mayer referred to a recent Washington Post article relating to a cancer patient who died from a medication and 'purpose' was not printed on the prescription drug label. He stated that politics prevented the 'purpose' from being printed on that label, and that patient-centered label items are lost.

Dr. Castellblanch advised that medical indication is an appropriate issue for the board to discuss, but on a future agenda.

Mr. Brooks stated that the committee has noted Dr. Mayer's request to speak at a future meeting. He encouraged Dr. Mayer to conclude his remarks.

Dr. Mayer expressed concern that his comments were not welcomed or allowed, even though his comments directly related to public health and patient safety. He stated that he had additional comments to share including the subject of languages, but that he felt shut down. Mr. Mayer asked that the record show that he was not able to speak freely.

Dr. Castellblanch stated that 'purpose' will be printed on a label, if noted by the prescriber, and if the prescriber indicates that it be printed on the label.

Ms. Herold noted that she responded to an e-mail from Dr. Mayer last week on an issue relating to prescription labels, and she offered to speak with him during the meeting break today.

Mr. Brooks stated that the public comment period was not a question and answer time, and that the purpose of this agenda item was to discuss how to roll out an education campaign relating to the new labeling requirements. He reiterated that prior to 2013, the board will review the requirements, and make adjustments if appropriate.

Kim Brown provided information regarding the department's strategies for public outreach on the new prescription label requirements. She stated that the department would conduct a kickoff in early March during consumer protection week. Ms. Brown stated that prescription drug labeling is an important subject, and they would have opportunities for media attention through press releases, a press conference, high-traffic blogs, and articles posted on medical association websites.

Mr. Brooks asked whether a poll had been conducted to best identify how to reach consumers. He asked whether the department knew where people get their information from.

Ms. Brown responded that she was not aware of that type of survey conducted by the department.

Mr. Brooks suggested that traditional ways of communicating are not always the best.

Ms. Brown noted that many senior citizens use Facebook, and websites like AARP get a high volume of traffic. She also noted that the public education campaign should hit the general audience as well, and that a television interview with the executive officer could be useful.

Mr. Brooks asked whether the board has taken a semi-scientific look at how best to reach consumers. He suggested that it could cost $15,000-$20,000 to conduct that type of survey.

Dr. Castellblanch suggested the use of ethnic media, particularly radio stations whose listeners speak other languages.

Ms. Herold commented that the board commissioned a study in 2000 relating to how consumers view pharmacies and pharmacists. The survey cost approximately $12,000-$15,000 and 750 people were surveyed. She was not sure whether the current budget condition would support another survey at this time, but it would be good to have evidence-based data about consumers.

Ms. Wheat noted that public outreach efforts are not only for consumers, but also for licensees. She wants to ensure that licensees are aware of the new requirements, particularly small pharmacies not affiliated with large chains. Ms. Wheat emphasized that the board should not wait until March to begin public education efforts. She added that the department's website and the board's website should already have this information.

Ms. Herold stated a subscriber alert was sent out by the board relating to the new requirements for prescription labels, and that all board-licensed facilities are required to join the board's e-mail notification list. In addition, an article was included in the last *The Script* that was specifically tailored to the new requirements for prescription labels. Ms. Herold also noted that she will discuss the issue at an upcoming CPhA meeting.

Ms. Wheat stated that the board needs to actively seek out pharmacies to be sure they have information regarding translation requirements. She also requested that the department provide a more detailed list of communication strategies, including plans to involve ethnic media. Ms. Wheat stated that she

wants to ensure that the board does not hand off responsibility for the public education campaign to the department. The board should work with the department regarding 'how' we are reaching out to the public, and exactly 'who' we are reaching out to.

Ms. Herold advised that the board doesn't send out press releases. The department (DCA) is a better resource for that because they're in touch with many consumer groups.

Ms. Wheat suggested that an interview be conducted with Senator Corbett. She also emphasized the use of local media.

Dr. Castellblanch strongly supported the idea for an interview with Senator Corbett, because of her efforts to improve prescription drug labels. He also provided feedback from two pharmacists that he had had recent contact with. Both pharmacists viewed the new requirements as just another rule with intrusive government oversight. Dr. Castellblanch encouraged the committee to include education about 'why' the new requirements were put into place, and 'how' the changes will improve patient safety. He suggested easy-to-read instructions in a fact sheet focusing on new rights under the law. Dr. Castellblanch also suggested that the public education campaign reflect ethnic communications, including ethnic radio stations.

Ms. Wheat stated that the board's public education should be proactive, instead of just passively sending out information.

Mr. Brooks appreciated the ideas presented for rollout of the public education campaign. He also suggested that public education include information for caregivers, as they are an integral part of patient safety.

Michael Negrete, CEO of the California Pharmacy Foundation (CPhA) stated that market research is worthwhile to be sure the right message gets out and is targeted effectively. He advised that CPhA had conducted research in this area because it's important to be on the right channel with the right message. Dr. Negrete emphasized that 'why' the new changes are important and 'how' the changes will make a difference in people's lives is also important. Otherwise, the new requirements will be yet another unfunded mandate by the government. Dr. Negrete also stressed the importance of the 'source' of the information. Would the public prefer to hear about the changes from the board? Would they prefer to hear about it from a doctor or their spouse? The gender of the person providing the information can also make a difference (i.e., female caregivers).

Mr. Brooks requested that CPhA share their research with the board.

Dr. Negrete agreed to share CPhA's research with the board.

3. Development of Consumer Education Videos for the Board's Website

Mr. Brooks noted that the board worked with the Department of Consumer Affairs (DCA) and a private vendor to produce a 3-minute video for consumers. The video is currently available on the board's public website, and it relates to how patients can prevent receiving medication errors. DCA has since hired in-house video staff, and a new video relating to the dangers of buying drugs on the internet is now in development. Board staff has been working with DCA on a manuscript for the new video.

Mr. Brooks advised that a revised script for the new video was provided in the meeting materials. He encouraged feedback on the script.

Ms. Herold commented that DCA has competing priorities, so production of this second video would probably not be completed until at least July 2011. She supported public outreach in videos due to the 'graphic' qualities of a video.

Ms. Veale expressed concern about the wording in the revised script regarding making sure a pharmacy is licensed in California. The wording states that you can look up the name of the pharmacy on our license look-up page. Ms. Veale questioned whether that was the best method, given that some consumers do not have internet access or are not computer savvy.

Ms. Herold advised that under California law, anyone can check the status of a pharmacist's or pharmacy's license on the board's public website. For consumers who do not have access to the internet, they are welcome to call the board's front desk main number, and our receptionists will be happy to check the status for them.

Ms. Brown noted that the script also reflected a toll-free phone number for DCA.

4. Update and Discussion on the Consumer Fact Sheet Series with California Schools of Pharmacy Interns

Mr. Brooks stated that the board approved a proposal by the committee to integrate pharmacy students into public outreach activities. The intent was to offer students an opportunity to work with the board on meaningful projects promoting consumer education, while the board would benefit from production of the materials. Several facts sheets were developed in collaboration with the UCSF Center for Consumer Self-Care, but funding issues prevented further participation. The board offered other schools of pharmacy the opportunity to have their students develop one-page fact sheets on various topics, and have the fact sheets reviewed by an expert. Representatives from other California pharmacy schools expressed interest in this project.

Mr. Brooks referred to a fact sheet template, guidelines, and potential topics included in the meeting materials. Five schools have confirmed their interest in the project, but materials from only two schools were submitted to the board for review. Unedited copies of the materials sent to the board were included in the meeting materials, as well as a copy of one finished fact sheet.

Mr. Brooks advised that the committee should determine how it wishes to proceed with this project. He asked whether the content provided in the unedited fact sheets was getting the right message across to consumers.

Ms. Veale stated that the draft fact sheets submitted had some good information, but not all materials conformed to the template and guidelines developed by the board.

Ms. Herold said she has learned that despite providing a template or guidelines, the drafts submitted for review are usually not refined enough to convert clearly into a good fact sheet for consumers. She referred to examples of draft submissions that reflected references, while others did not indicate the source of the content. Ms. Herold also cautioned against providing medical advice to consumers.

Dr. Castellblanch commented that he appreciated the efforts of the students, and their submissions showed imagination. He noted that materials should be fully vetted before release to the public. Dr. Castellblanch noted he would try to involve his students at San Francisco State, though he would need to have the project approved before putting it into sequence with other events and projects.

Mr. Brooks expressed his appreciation to Dr. Castellblanch for his interest in involving school of pharmacy students, and for his expertise.

Ms. Veale emphasized that choosing appropriate topics is key because the board can provide consumer information, but not advice. She noted that students may not follow a format or guidelines, so oversight is necessary. Ms. Veale also advised that our list of potential topics should be evaluated so that we will provide the appropriate information to consumers.

Dr. Castellblanch emphasized that students are given directions for semester projects and terms papers, but still they may not follow these instructions. He suggested that our instructions to students be very specific, and that the students have guidance.

Dr. Mayer stated that he regularly distributed the board's fact sheets at public outreach events. He asked the board to consider development of additional facts sheets on three topics:

- take-back of drugs

- medical marijuana
- medication therapy management (preventing errors)

5. Balancing Providing Important Consumer Information vs. Consumer Indifference to Reading Extensive Important Warnings in Public Education Materials

Mr. Brooks referred to an October 2010 article entitled, “Supreme Court Chief Justice Admits He Doesn’t Read Online EULAs or Other Fine Print.” In the article, Richard Posner admitted to not reading boilerplate legalese on his mortgage agreement or reading the fine print on websites or medicines.

Mr. Brooks noted that this item was added to the agenda for discussion purposes only. He noted that there is a balance between providing consumer information with the human tendency to disregard too much information. Mr. Brooks emphasized that this matter lies at the heart of effective consumer and licensee education. Information needs to be conveyed, but too much information will have the opposite effect because the reader may totally disregard the message.

Mr. Brooks supported the idea that sometimes ‘less is more’ and the committee should be mindful not to bombard consumers with too much information. There could be unintended consequences when trying to provide relevant information on posters, a label, a video, or any other form of communication.

No public comments were provided on this agenda item.

6. Suggestions from Pharmacists Planning Services, Inc. on a Redesigned Notice to Consumers

Mr. Brooks stated that Pharmacists Planning Services, Inc. recently sent two posters for consideration by the board. One poster was designed with the intent of placement in pharmacies, and the other was designed to post in prescribers’ offices.

Ms. Herold stated that both posters came to the board unsolicited via e-mail. While the posters were simple and straightforward, neither complied with the legal requirements in Business and Professions Code Sections 4122 and 733(f). Ms. Herold referred to the meeting materials that also contained the current Notice to Consumers posters that meet all current requirements. She also noted that copies of the current Notice to Consumers posters were displayed with other outreach materials at the back of the hearing room. The display included Notice to Consumers posters in four other languages (Spanish, Chinese, Tagalog, and Vietnamese). She noted that there is a balancing act in using the fewest number of words to draw attention with a catchy headline to draw the reader in for the rest of the information.

Ms. Herold suggested that the author(s) of the draft posters submitted need to review the current requirements in the statute.

Dr. Castellblanch suggested that the committee stay in touch with the author(s), and that he was curious as to what else they would come up with. The notices could still be effective in educating the public.

Ms. Herold advised that the board has decided to develop two additional topics for posting in a pharmacy. One notice will relate to the right of patients to request a 12-point font printed on their prescription labels. Another notice will relate to the right of patients to have access to interpretative services. The board is currently working on both new notices for the Legislation/Regulation portion of the next board meeting. Ms. Herold emphasized that consolidating the four notices is important, so that patients are not overwhelmed with too much information.

7. Assessment of the Board's Public Education Materials

Mr. Brooks stated that at the July 2010 Public Education committee meeting board members Debbie Veale and Ramón Castellblanch agreed to work as a subcommittee to assess the board's public education materials. To assist in that effort, board staff subsequently prepared a list of all 50 State Boards of Pharmacy and their corresponding consumer information.

Ms. Veale stated that they reviewed the board's public website, and noted a long list of consumer materials. She said they want to ensure that the board is focusing on the right areas, and she noted three categories – board information, drug information, and miscellaneous information.

Ms. Veale noted that the list compiled by board staff reflecting other states showed that California's materials for consumers is robust, compared to all other states. She noted that we probably don't need to add more materials at this time, but that our materials need to be displayed in a better way on the website.

Dr. Castellblanch stated that a considerable upgrade is in order to improve the way that consumer materials are displayed on our website. He suggested that critical information be listed first, instead of showing documents in alphabetical order. Dr. Castellblanch said that we need to work on the 'look and feel' of our public website because the current presentation is not the most intuitive. He noted that relevant information is provided, including a link to Best Buy Drugs and other sites where you can compare pricing. Dr. Castellblanch emphasized that consumers would benefit if we highlight the resources already posted on our website, so we need to improve way information is presented.

Mr. Brooks instructed the subcommittee to continue their review, and report back to the next Communication and Public Education Committee meeting.

No public comments were provided on this agenda item.

8. Public Education Materials Under Development and Proposed for the Future

Mr. Brooks advised that the board hopes to review new facts that will be developed by school of pharmacy interns. He also referred to three facts sheets for licensees that are currently being developed by staff:

- Questions and answers relating to the board's compounding regulations. The questions and answers relate to a discussion held at the June 2010 Enforcement Committee, and an ongoing number of questions being asked of the board regarding the compounding regulations. A subcommittee of board members worked with board senior staff to refine the responses which they'll bring back to the board as part of the February 2011 Enforcement Committee report.
- The Pharmacists Recovery Program
- Becoming a Licensed Pharmacist in California

Mr. Brooks also referred to the revision of self-assessment forms for community pharmacies, hospital pharmacies, and wholesalers. These materials are being updated by staff, and will be promulgated as regulations.

No public comments were provided on this agenda item.

9. Update on *The Script*

Mr. Brooks stated that work on the February 2011 issue of *The Script* was in progress, and will be submitted to Legal for review.

Ms. Herold stated that the February 2011 issue will focus on new pharmacy law and regulations for 2011. The issue will also include an update for licensees about the requirements for patient-centered prescription labels, an article about medication errors reported to the board during 2009/10, and the board's citation and fines issued for those errors.

Ms. Herold noted that work will soon begin on the July 2011 edition of *The Script*. The July 2011 issue will highlight questions and answers regarding pharmacy law. Ms. Herold noted that retired annuitant Hope Tamraz develops the board's newsletters.

No public comments were provided on this agenda item.

10. Update of the Emergency Contraception Protocol Regulation (16 California Code of Regulations Section 1746) and Consumer Fact Sheets

Mr. Brooks stated the board must update the emergency contraception protocol authorized by California Business and Professions Code Section 4052.3 and 16 California Code of Regulations Section 1746. These sections authorize a pharmacist to initiate emergency contraception pursuant to a state protocol developed by the Medical Board of California and the Board of Pharmacy, and with the assistance of the American College of Obstetricians and Gynecologists, the California Pharmacist Association, and other entities. The current state protocol was developed in 2004 and adopted by this board as a regulation. There is a typographical correction that needs to be made, and there have been subsequent changes in the availability of emergency contraception medicine and the manufacturers who produce the medication.

Ms. Veale asked when the new protocol would be available.

Ms. Herold advised that the Medical Board must recommend the protocol first. She has received comments, and additional comments are forthcoming next week. She has met with the Medical Board's executive officer, spoken with the women's health specialist pharmacist, and a representative of the American College of Obstetricians and Gynecologists. An updated manuscript will be prepared, and will be shared with all entities and brought to the board at the May 2011 board meeting. After both boards have an opportunity to review and approve the protocol, the Board of Pharmacy will need to adopt the protocol as a revision to regulation section 1746. As part of the rulemaking, this board will need to develop a patient information fact sheet, which is required to be provided to patients by the pharmacists using the protocol to dispense emergency contraception.

Mr. Brooks asked whether the data had changed since 2004, and whether there were additional types of drugs now available.

Ms. Herold stated that different companies have bought out other companies during the past few years. She emphasized that the board will need to fully vet the protocol before it is released to the public.

Dr. Castellblanch asked whether the Medical Board was the lead agency for the update (protocol).

Ms. Herold stated that the Medical Board is really the lead agency on this issue. The protocol must be approved by the Medical Board first.

There were no public comments provided on this agenda item.

11. Public Outreach Activities Conducted by the Board during the second quarter of Fiscal Year 2010/11:

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Mr. Brooks referred to the list of public outreach activities provided in the meeting materials. He noted the following activities:

- September 27, 2010 – Inspector Wong provided information about Board of Pharmacy enforcement to students at California Northstate School of Pharmacy
- October 22, 2010 – Executive Officer Herold presented information about the 2010 legislative year at Seminar 2010, the annual meeting of the California Society of Health System Pharmacists (CSHP) in San Francisco
- October 22-23, 2010 – Executive Officer Herold and Inspector Hokana staffed the board's public information booth at CSHP's Seminar 2010
- November 9, 2010 – Executive Officer Herold presented information on e-prescribing and e-prescribing of controlled drugs to attendees of a CalERx Conference in Oakland
- December 15, 2010 – Executive Officer Herold provided a presentation on California's patient-centered prescription container label requirements at a quarterly meeting of the California Hospital Association's Medication Safety Committee

There were no public comments on this agenda item.

12. Public Comment for Items Not on the Agenda

Mr. Brooks commented that new (public) board members who are not licensed pharmacists can be at a disadvantage as to the issues of pharmacies. He said that he finds himself lacking in knowledge, and suggested a training program for new board members. Mr. Brooks suggested that training could include types of drugs, drug delivery systems, and an on-site viewing of a distribution center.

Mr. Brooks also commented that we are in a 'revenue-challenged' era. He asked whether the board would be in worse shape in the future. He asked if there are ways for the board to generate revenue, while not impacting consumers. Mr. Brooks asked whether the board considered allowing advertising on the public website as the State of Hawaii has done.

The meeting was adjourned at 12:20 p.m.

Attachment 8

COMMUNICATION AND PUBLIC EDUCATION COMMITTEE

Goal 4: Provide relevant information to consumers and licensees.

Outcome: Improved consumer awareness and licensee knowledge.

Objective 4.1	Develop a minimum of 10 communication venues to the public by June 30, 2011.
Measure:	Number of communication venues developed to the public.
Tasks:	1. Assess the effectiveness of the board's educational materials and outreach: survey consumers to identify whether board-produced materials are valued and what new materials are desired. *2006-2007:* *Staff conducts assessment of the board's consumer outreach written materials. Material is identified for revision and update, future development, or evaluation for continued need.* *2007-2008:* *Board publishes new board brochure and complaint brochure, and redesigns several board brochures into new single-page, format.* 2. Restructure the board's website to make it more user friendly. *2006-2007:* *Website modified to contain lists of disciplinary actions finalized each quarter and permit online access to public documents regarding board disciplinary actions taken against a licensee.* *Links added to obtain various information regarding medication safety, and drug interactions, and information from FDA regarding Medications and Medical Devices.* *Work Initiated on new website design to meet new state design standards.* *2007-2008:* *New website design completed in November 2007.* *Web page created consolidating all information on e-pedigree into one place.* *1st Qtr 09/10:* *Regulation section of the board's Web site updated to improve presentation and readability.* *Status of board licensees on probation changed from "active" to "disciplined".* *3rd Qtr 09/10:* *Updated website template to conform with new directive from Governor.* 3. Work with the California Health Communication Partnership on integrated public information campaigns on health-care topics. *2006-2007:* *Committee continues collaboration with the partnership whose fall campaign is screening for prostate and breast cancer. Plans underway to work to promote generic drugs in the future.* *No additional meetings scheduled after January 2007.*

4. Continue collaboration with schools of pharmacy for pharmacist interns to develop consumer fact sheets on health topics.

2006-2007: *Nine previously developed fact sheets are sent to a translation service to develop Spanish, Chinese, and Vietnamese versions of these materials. Four new fact sheets developed and undergoing review by the board.*

2007-2008: *The committee determines that the board will expand the project beyond the Center for Consumer Self Care to include students from other Schools of Pharmacy.*

Meanwhile discussion with UCSF lead to request for funding to continue project.

Meanwhile board seeks to establish intern projects with other schools of pharmacy.

1st Qtr 08/09: *Letter to Deans of California's pharmacy schools mailed.*

1st Qtr 09/10: *Staff prepare to initiate program using intern coordinators at school of pharmacy campuses in California.*

4th Qtr 09/10: *UCSD submits fact sheets for board consideration.*

Western, USC and California North State all anticipate programs beginning in fall 2010.

5. Develop a Notice to Consumers to comply with requirements of AB 2583 (Nation, Chapter 487, Statutes of 2006) on patients' rights to secure legitimately prescribed medication from pharmacies.

2006-2007: *Governor signs AB 2583.*

Committee advances draft regulation text for comment at the October Board Meeting. Board votes to create a second Notice to Consumers poster vs. adding additional language to current poster.

Committee refines language to be advanced to the board. Board reviews, modifies, and sets for regulation notice the proposed language for a second Notice to Consumers poster.

2007-2008: *New "Notice to Consumers" approved by board and later by the Office of Administrative Law.*

New design and layout for two new Notice to Consumer posters are selected.

1st Qtr 08/09: *New posters are mailed to California pharmacies.*

2nd Qtr 08/09: *Posters are translated into several languages and made available on the board's website.*

6. Evaluate the practice of pill splitting as a consumer protection issue.

2006-2007: *Board holds discussion of pill splitting issues during January and April 2007 Board Meetings.*

2007-2008: *The Script newsletter contains an article for pharmacists on pill splitting and a Fact Sheet for consumers is completed.*

7. Evaluate the SCR 49 Medication Errors Report for implementation.

2006-2007: *Communication and Public Education Committee reviews SCR 49 report and board has presentation of the SCR 49 report.*

2007-2008: *SB 472 enacted to require the board to standardize container labels into a patient friendly format by 2011.*

Feb. 2009: *SB 470 introduced to add "purpose" to the prescription container's label.*

Sept. 2009: *SB 470 is enrolled and sent to the Governor.*

8. Develop patient-centered standardized prescription container labels by 2011 pursuant to SB 472 (Corbett, Chapter 470, Statutes of 2007).

Oct. 2007: *Board president appoints members to subcommittee.*

Jan. 2008: *Board readies plans for six public hearings statewide during 2008*

April 2008: *First meeting in Fremont on April 12. Approximately 40 people attend.*

Apr. - Jul. 08: *Board attends health fairs and interviews patients for information on how to improve prescription labels. Survey available on board's website. 123 surveys completed.*

July 2008: *Board Inspector Bayley and Associate Analysts Durst and Abbe staff a resource table at the Lotus Festival in Los Angeles and interview attendees about their prescription labels as part of the board's initiative to implement a patient-centered prescription label.*

Aug. 2008: *Associate Analysts Durst and Abbe and Assistant Executive Officer Sodergren staff the department's booth at the State Fair and distribute brochures, respond to public questions and elicit suggestions to improve the labeling on prescription labels.*

Oct. 2008: *Board Member Powers provides information and conducted labeling surveys of those attending CARA's annual meeting.*
Publications Coordinator Abbe attends Celebrando Nuestra Salud to conduct labeling surveys of those in attendance.

Nov. 2008: *Board sponsors public forum on health literacy and designing patient-centered labels. National experts provide information.*

Dec. 2008: *Board Executive Officer participates on National Association of Boards of Pharmacy task force to develop national standards for patient-centered labels.*
Board and CPhA develop joint survey for administration via listeners of radio stations on patient medication labels.

Jan. 2009: *Over 600 consumer surveys submitted; SB 472 Subcommittee meets to begin developing regulations. Radio surveys add 1,800 additional survey responses.*
Subcommittee holds afternoon meeting in San Diego.

March 2009: *Evening meeting held on SB 472 task force draws a few more public attendees.*
Ongoing surveys from consumers continues.

July 2009: *Draft regulation language discussed by board.*

Aug. 2009: *Draft regulation language discussed by board.*

2nd Qtr 09/10: *Board holds informational hearing, finalizes language and releases regulation for 45-day comment period.*

Dec. 2009: *Board submits required report to Legislature on implementation to date of SB 472's provisions.*

Jan. 2010: *Board holds regulation hearing and make text changes to be released for 15-day comment period.*

Feb. 2010: *Board meets and deliberates on proposed modified text. Text released for 15-day comment period after meeting from February 22 - March 10, 2010.*

April 2010: *Board meets and discusses the more than 1,200 comments received.*

June 2010: *Board adopts regulation as noticed on February 22, 2010.*

Nov. 2010: *Office of Administrative Law approves regulation.*

Jan. 2011: *Regulation takes effect.*

	9. Address and promote licensee and public education on minimizing prescription errors. *July 2008:* *Forum on medication errors held as part of board meeting. Michael Cohen, Institute of Safe Medical Practices, John Keats, California Patient Action Coalition, and Lorian deMartini, California Department of Public Health, talk about activities of their organizations to prevent errors.* *Board Inspector Orlandella represented the board on a panel to a group of seniors in Roseville, California.* *Jan. 2009:* *Board publishes medication errors segment in its newsletter, The Script, describing several medication errors investigated by the board.* *June 2009:* *Enforcement Committee hears presentation on board investigations of medication errors during 2008/2009.* *June 2010:* *Executive Officer attends meeting, convened by the California Pharmacy Foundation, discussing ways to reduce medication errors in pharmacies.* 10. Educate consumers about steps they can take to prevent receiving a medication error. *2nd Qtr 09/10:* *Develops and distributes 3-minute video tape on how patients can prevent receiving a medication error.* *Video placed on the board's Website.*

Objective 4.2	Develop 10 communication venues to licensees by June 30, 2011.
Measure:	Number of communication venues developed to licensees.
Tasks:	1. Publish *The Script* two times annually. *Jul. 2008:* *The Script published, placed online and mailed to pharmacies and wholesalers.* *Apr. 2009:* *"February" issue of The Script published, placed online and mailed to pharmacies and wholesalers.* *Jul. 2009:* *"July" issue of The Script written and undergoing review.* *Jan. 2010:* *"July" issue of The Script, now finalized.* *March 2010:* *Titled as "February 2010" board newsletter published and released. Future issues will be released online.* *Sept. 2010:* *"September" issue released online only; this is the first issue not printed and mailed.* 2. Develop board-sponsored continuing education programs in pharmacy law and coordinate presentation at local and annual professional association meetings throughout California. *2006-2007:* *The board's members, supervising inspector and executive officer provide 22 CE and licensee educational seminars during the year.* *2007-2008:* *The board's members, supervising inspector and executive officer provide at least 10 CE and licensee educational seminars during the year.* *1st Qtr 08/09:* *Board Member Goldenberg provides information about pharmacy law to medical staff at the Jewish Home Hospital in Los Angeles.* *President Schell speaks on requirements regarding conscience provisions in California law at Loma Linda University.* *2nd Qtr 08/09:* *Executive Officer Herold speaks to the CSHP's Board of Directors about the board's heparin inspections.* *Executive Officer Herold speaks to CSHP's Seminar on Board legislative and regulation activities.* *Assistant Executive Officer Sodergren and Supervising Inspector Ratcliff staff an informational booth at CSHP's Seminar.* *Executive Officer Herold speaks to CSHP's Seminar on the heparin inspections conducted with the California Department of Public Health in California Hospitals.* *Executive Officer Herold speaks to CSHP's Seminar on California's e-pedigree requirements.*

	3rd Qtr 08/09:	*Executive Officer Herold and Board President Schell provide three presentations at the California Pharmacists Association's Outlook on the Board of Pharmacy, major issues before the board and medication errors.* *Supervising Inspector Ratcliff provides a presentation about pharmacy law to 70 students at Loma Linda's School of Pharmacy.* *President Schell provides a presentation on Board of Pharmacy issues to the San Diego CPhA meeting.* *Supervising Inspector Ratcliff presents information on "How to Survive a Board Inspection" to 80 pharmacists at a Vietnamese Pharmacist Association.* *Board President Schell provides a presentation to UCSF School of Pharmacy on ethics and integrity in pharmacy.* *Executive Officer Herold and President Schell present a 1.5 hour CE lecture on the Board of Pharmacy at that CPhA's annual meeting.* *Supervising Inspector Ratcliff and Assistant Executive Officer Sodergren staff a booth at the CPhA's annual meeting answering pharmacy law and licensing questions.* *Executive Officer Herold and President Schell discuss the role of a regulatory agency in investigating and preventing medication errors as CPhA's annual meeting.* *Executive Officer Herold provides presentation to UCSF and UCSD students in a first year pharmacy school law class.* *President Schell provides a presentation to students at the USC School of Pharmacy.*
	4th Qtr 08/09:	*Executive Officer Herold presented information about the Board of Pharmacy and ongoing projects at a California Society of Health-System Pharmacists Town hall meeting at Loma Linda for 80 pharmacists.* *Executive Officer Herold presented information about the Board of Pharmacy and ongoing projects at a CSHP Town hall meeting at UOP for 60 pharmacists.*
	1st Qtr 09/10:	*Executive Officer Herold presented at CSHP Board of Directors Meeting.* *Supervising Inspector Nurse presented at CPhA's Long Term Care Board Meeting.* *Executive Officer Herold presented at CSHP Sacramento Valley Chapter Meeting.*
	3rd Qtr 09/10:	*Board inspectors provided five continuing education sessions on pharmacy law or inspections. Additionally the board staffed an information booth at CPhA's annual meeting. Executive Officer Herold provided an update on 2010 pharmacy law changes, and Executive Officer Herold and President Schell provided an update on Board of Pharmacy activities underway and during 2009.*
	4thQtr 09/10:	*Executive Officer Herold and Supervising Inspector Ratcliff presented information about the Board of Pharmacy and answered questions about pharmacy law to 60 Costco Northern California pharmacy managers.*
	1st Qtr 10/11:	*Inspector Wong provided information about Board of Pharmacy enforcement activities to students at California Northstate School of Pharmacy.*

	2nd Qtr 10/11:	*Executive Officer Herold presented information about the 2010 legislative year at Seminar 2010, the annual meeting of the California Society of Health System Pharmacists (CSHP) in San Francisco.* *Executive Officer Herold and Inspector Hokana staffed the board's public information booth at CSHP's Seminar 2010.* *Executive Officer Herold presented information on e-prescribing and e-prescribing of controlled drugs to attendees of a CalERx Conference in Oakland.* *Executive Officer Herold provided a presentation on California's patient-centered prescription container label requirements at a quarterly meeting of the California Hospital Association's Medication Safety Committee.*

3. Maintain important and timely licensee information on website.

2006-2007:
Added 50-year pharmacist recognition pages as a special feature.
Updated license totals.
Added enforcement actions for effective dates between April 1 and June 30, 2005.
Changed definitions on license lookup to clarify license status.
Sent out more than 50 subscriber alert notifications to the board's e-mail notification list.
Unveiled new website of the board, and created new web links.
Revised and added new fax and contact information to speed communication with appropriate enforcement and licensing staff.
Added frequently asked questions on emerging contraception.
Updated the board's online lawbook.
Created a page dedicated to drug alerts and recalls.
Sent out three disaster response subscriber alerts regarding the Southern California wildfires to the board's e-mail notification list.
Created a page dedicated to e-pedigree information and laws.
Updated the 2008 lawbook.
Added two sets of comments submitted to the FDA in support of a unique identifier and on promising technologies for prescription drug identification, validation, track and trace or authentication to e-pedigree page.
Added survey of patients for prescription container labels.
Added page for subscription to board mailing list.

1st Qtr 08/09:
Updated information regarding release of exam results.
Added enforcement actions for the effective dates between July 1 and September 30, 2008.
Added two recall notifications to FDA recall page.
Posted board and committee meeting agendas and materials.
Sent out 24 subscriber alert notifications to the board's email notification list.

2nd Qtr 08/09:
Updated online renewal forms for individual licenses.
Created information on CURES page.
Created a survey page for public opinion on how to improve prescription labels (SB 472) in English and Spanish.
Added three recall notifications to FDA recall page.
Posted board and committee meeting agendas and materials.
Sent out 20 subscriber alert notifications to the board's email notification list.

3rd Qtr 08/09:
Began process of making all PDFs on board's website accessible for the visually impaired.
Added four recall notifications to FDA recall page.
Posted board and committee meeting agendas and materials.
Sent out 27 subscriber alert notifications to the board's email notification list.
Posted latest edition of The Script.
Board mails letter pursuant to SJR 19 (Ridley-Thomas, Statutes of 2008) regarding prohibition of healing arts licensees not to engage in torture.

4th Qtr 08/09:	*Continued making all PDFs on board's website accessible for the visually impaired.* *Updated lawbook to 2009 edition.* *Added four recall notifications to FDA recall page.* *Posted board and committee meeting agendas and materials.* *Sent out 26 subscriber alert notifications to the board's email notification list.*
1st Qtr 09/10:	*Updated information regarding release of exam results.* *Added enforcement actions and accusations for the effective dates between July 1 and September 30, 2009.* *Made Pending Regulations page more user friendly.* *Posted board and committee meeting agendas and materials.* *Sent out 16 subscriber alert notifications to the board's email notification list.*
2nd Qtr 09/10:	*Added enforcement actions and accusations for the effective dates between Oct 1 through Dec 31, 2009.* *Posted board and committee agendas and materials.* *Sent out 28 subscriber alert notifications to the Board's email subscriber list.* *Migrated subscriber list to new software program and created an additional subscriber list for emergency compounding.*
3rd Qtr 09/10:	*Added enforcement actions and accusations for the effective dates between Jan 1 through March 31, 2010.* *Updated lawbook to 2009 edition.* *Posted board and committee agendas and materials.* *Sent out 17 subscriber alert notifications to the Board's email subscriber list.* *Created online Change of Address form.*
4th Qtr 09/10:	*Added enforcement actions and accusations for the effective dates between April 1 through June 30, 2010.* *Posted board and committee agendas and materials.* *Sent out 16 subscriber alert notifications to the Board's email subscriber list.*
1st Qtr 10/11:	*Added enforcement actions and accusations for the effective dates between July 1 and September 30, 2010.* *Updated information regarding release of exam results.* *Continued making all PDFs on board's website accessible for the visually impaired.* *Updated lawbook to 2010 edition.* *Added 2 recall notifications to FDA recall page.* *Posted board and committee meeting agendas and materials.* *Sent out 24 subscriber alert notifications to the board's email notification list.* *Posted latest edition of The Script.*
2nd Qtr 10/11:	*Added enforcement actions and accusations for the effective dates between October 1 and December 31, 2010.* *Updated information regarding release of exam results.* *Continued making all PDFs on board's website accessible for the visually impaired.* *Added 30 recall notifications to FDA recall page.* *Posted board and committee meeting agendas and materials.* *Sent out 53 subscriber alert notifications to the board's email notification list.*

Objective 4.3	Develop communication venues for other health care professionals (e.g., physicians, nurses).
Measure:	Number of communication venues developed to other health care professionals.
Tasks:	*2nd Qtr 10/11: Worked with Medical Board to produce guidance document for pharmacies and prescribers on the DEA's requirements for e-prescribing controlled drugs.*

Objective 4.4	Participate in 12 forums, conferences and public education events annually.
Measure:	Number of forums participated.
Tasks:	1. Participate in forums, conferences and educational fairs. *1st Qtr 09/10:* *Board President Schell volunteers in "Standdown" an event for homeless veterans in San Diego and dispensed prescriptions and counseled patient's regarding their medications.* *Executive Officer Herold makes a presentation on patient-centered medication labels during a "Women in Government Conference" in San Diego. The group was comprised of female legislators representing the western United States.* *Board President Schell makes a presentation to the Indian Pharmacist Association about board activities.* *Supervising Inspector Nurse makes a presentation to the California Pharmacists Associations Long Term Care Board regarding DEA and CURES compliance issues.* *Executive Officer Herold makes a presentation on California e-pedigree requirements to Logipharma to a group of manufacturers.* *Executive Officer Herold makes a presentation on California e-pedigree requirements to Specialty Pharma to a group of contract drug manufacturers.* *2nd Qtr 09/10:* *Executive Officer Herold presents information on e-pedigree requirements to Healthcare Distributors Management Association's Track and Trace Conference.* *Executive Officer Herold provides CE presentation on medication errors as part of a day long conference at California Northstate College of Pharmacy.* *Executive Officer Herold provides a presentation on "take back" drugs to 20 rural California County Governments.* *Executive Officer Herold provides CE presentation on activities of the board the Sacramento Valley Society of Health Systems Pharmacists.* *Supervising Inspector Dang provides a CE presentation to a group of pharmacists in Orange County.* *Executive Officer Herold provides information about the board's patient-centered label requirements to CPhA's Long Term Care Committee.* *Executive Officer Herold and President Schell attended California Hospital Association's Hospital Drug Distribution Meeting in Sacramento.*

	3rd Qtr 09/10: *Executive Officer Herold did a Webinar on California's e-pedigree requirements hosted by IBS.* *Executive Officer Herold and Assistant Executive Officer Sodergren did a presentation to 200 California NorthState School of Pharmacy students on the board's enforcement program.* *Supervising Inspector Nurse provided information to 50 consumers about medication discount plans, Internet purchase of drugs, counterfeit drugs and obtaining medication safety.* *President Schell provided information at UCSF about pharmacy at Career Day.* *Supervising Inspector Nurse provided a presentation on pharmacy law to Loma Linda students.* *President Schell provided a presentation on the future of pharmacy to 200 students at CAL.* ***4th Qtr 09/10:*** *Executive Officer Herold presented information about the Board of Pharmacy and ongoing projects at a California Society of Health-System Pharmacists Board of Directors Meeting in Sacramento.* *Executive Officer Herold and Supervising Inspector Ratcliff presented information about the Board of Pharmacy and answered questions about pharmacy law to 60 Costco Northern California pharmacy managers.* *Board Member Kajioka provided presentations to students at the University of the Pacific about new pharmacy law and projects at the Board of Pharmacy.* *Supervising Inspector Nurse made a presentation about drug thefts and robberies from pharmacies at a day-long San Diego Pharmacy Conference hosted by the federal Drug Enforcement Administration. Over 100 pharmacy representatives attended.* *Board President Schell and Executive Officer Herold hosted a booth at the annual National Association of Boards of Pharmacy Meeting in Orange County.* *Inspector Toevs provided a presentation about lowering drug costs at a community meeting hosted by Senator Liu in Los Angeles* *Executive Officer Herold presented information about the board's compounding requirements and other key board issues to a meeting of the Bay Area Pharmacy Directors at Stanford.* *Executive Officer Herold attended a conference hosted by the California Endowment on Building Quality and Equitable Health Care Systems in Los Angeles.* *Board Member Schell and Executive Officer Herold participated in a High Risk Drug Task Force Meeting, hosted by the California Hospital Association.* *Executive Officer Herold attended a Medication Safe Alliance Conference in San Francisco hosted by the Pharmacy Foundation of California.* *Executive Officer Herold presented information on the role of the executive officer at the Department of Consumer Affairs Board Member Orientation in Sacramento.*

	1st Qtr 10/11:	*Executive Officer Herold presented information about preventing medication errors, the Board of Pharmacy's mandate and ongoing projects at a DCA-hosted meeting of consumers in Sacramento. The FDA also provided information during event.* *Executive Officer Herold provided information about the CIWMB's drug take back guidelines at a CalRecycle Hearing focusing on a draft report to the Legislature (the board also submitted written comments following this hearing).* *Executive Officer Herold provided comments on a hospital repopulation policy developed by the California Hospital Association with the Department of Public Health via conference call. (This document was finalized in October.)* *Executive Officer Herold provided information about the board's ongoing activities at the NACDs Technology Meeting in San Diego.* *Executive Officer Herold attended an invitation only conference at UCSF on pharmacy leadership, which focused on inpatient facilities.* *President Weisser and Board Member Veale hosted a board information booth at the Indian Pharmacist Annual Meeting in Orange County.* *Executive Officer Herold provided a presentation to 300 attendees on California's e-pedigree requirements to pharmaceutical company compliance staff at the 2010 PDMA Sharing Conference in San Diego.* *Executive Officer Herold participated as a member of the National Association of Pharmacy Board's Task Force on Recommended Revisions to the federal Controlled Substances Act. Participation was via telephone call because out of state travel would have been required to physically attend the meeting.* *Executive Officer Herold and Board Liaison Joshua Room provided information about California's e-pedigree requirements at the GS1 workshop conference in San Francisco.* *Executive Officer Herold presented information about preventing medication errors, the Board of Pharmacy's mandate and ongoing projects at a DCA-hosted meeting of consumers in Sacramento. The FDA also provided information during event.* *Executive Officer Herold provided information about the CIWMB's drug take back guidelines at a CalRecycle Hearing focusing on a draft report to the Legislature (the board also submitted written comments following this hearing).* *Executive Officer Herold provided comments on a hospital repopulation policy developed by the California Hospital Association with the Department of Public Health via conference call. (This document was finalized in October.)* *Executive Officer Herold provided information about the board's ongoing activities at the NACDs Technology Meeting in San Diego.* *Executive Officer Herold provided information about the board's Intern Fact Sheet Project to students at the University of the Pacific who are working on fact sheets for the board.*

	2nd Qtr 10/11: *Board Vice President Kajioka provided information about the board's consumer materials to a group of 150 consumers at a consumer education event in Assemblymember Hayashi's district.* *Executive Officer Herold attended an invitation only conference at UCSF on pharmacy leadership, which focused on inpatient facilities.* *President Weisser and Board Member Veale hosted a board information booth at the Indian Pharmacist Annual Meeting in Orange County.*